

Olmstead Task Force Recommendation Cost Out Report – Phase 1

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7. Recommendation #: 10	8. Recommendation (include report page number):	
9. Report Time Frame: <input checked="" type="checkbox"/> Immediate <input type="checkbox"/> Medium <input type="checkbox"/> Short <input type="checkbox"/> Long	# 10. Expand RCSC concept at NVTC to other 4 training centers. (P 29)	
10. This recommendation <input checked="" type="checkbox"/> is <input type="checkbox"/> is not within the authority of the Commonwealth to implement. <i>If "is not" is checked, <u>explain here and attach appropriate documentation.</u></i>		
11a. <input checked="" type="checkbox"/> Direct Impact (D) <input type="checkbox"/> Systems Support (S) 11b. If (D), how does cost out address oversight of services and/or supports? DMHMRSAS community services section will continue to review activities of the Regional Community Support Centers and participate in the advisory group from each of the 5 regions. The 4 new regions will establish an advisory group from various advocacy networks, CSBs, colleges, private hospitals, and community providers to develop goals and objectives of each center geared to the locality.		

12. Assumptions (add additional sheet/s if necessary):

1. How recommendation would be implemented: Each region led by the MR Training Center, will identify specialized medical, dental, psychiatric, behavioral and other clinical services that are unavailable in the community. The RCSC (Regional Community Support Center) will make available the experience, expertise and specialized resources. Clinical teams such as for behavior consultation, occupational therapy, diet/nutrition evaluation, and speech will be available to provide service in an appropriate environment. This may be in the community to provide services to the person in crisis in their home or at work. For the proactive treatment of the person who is currently underserved in their medical/developmental service market the service can be provided in an office or clinic in the community. The proliferation of this spectrum of services will require each training center to partner with the community hospital(s), CSBs, university's, colleges and local practioner's to enhance professional expertise in the community by providing training and educational opportunities. Services that are provided may vary slightly within each region depending on demand.
2. Each of the 4 training centers will need funds to develop or expand dental capacity with equipment such as a chair, autoclave, etc. Each @ \$100,000 for one time funds. \$200,000 for the first year (2 Centers) and \$ 200,000 (2 additional Centers) for the second year. Total one time costs \$ 400,000. We are recommending a phase in of two centers the first year and two the second year.
3. Each center will have a part-time or fulltime dentist, behaviorist, psychiatrist, part-time center program coordinator, and other part-time clinical experts as needed available through the RCSC cost center (separate from the Medicaid cost center). Approximately \$ 200,000 of the cost per year per site. Total \$ 400,000 in the first year (for 2 centers) and \$ 800,000 in the second and consecutive years for all 4 centers.
4. Clinical services will be provided to the community for the remainder of the funds @ \$ 250,000 per year per site. Total of 500,000 for the first year for 2 centers and additional \$ 500,000 for the second year totaling \$ 1,000,000 for each consecutive year.
5. The number of persons served will vary based on need from year to year, but should average about 400 per RCSC per year in the 3 rd year of operation.
6. Each RCSC will become a Medicaid provider of services as indicated by the types of services they provide and will bill Medicaid to expand the numbers served. Monies recouped by 3 rd party reimbursement will go back into the RCSC cost center.

13. This recommendation requires: ☐ Legislation ☒ Appropriation Act language
 (Check all that apply) ☐ Regulatory action ☐ No action-already implemented (attach documentation)

THIS IS NOT A BUDGET REQUEST

xx New Funding Existing funding--staff costs (\$)

14. Summary of *new* funding and positions needed:

a. Fiscal Year	b. No. of People Served	c. Dollars						d. # of Positions	
		GF			NGF			GF	NGF
		One-time	Start up	Ongoing	One-time	Start up	Ongoing		
FY 2004								6	
FY 2005	300	200,000		900,000				6	
FY 2006	750	200,000		900,000					
FY 2007	1600								
FY 2008									
FY 2009									
FY 2010									
FY 2011									
FY 2012									